



## AT HOME FAMILY DAY CARE SCHEME FAMILY HOLIDAY ADVICE

Educator Name: \_\_\_\_\_ of (address): \_\_\_\_\_

Child's First Name: \_\_\_\_\_ Child's Surname: \_\_\_\_\_

D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of absence from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Will child be leaving Australia at this time?  YES  NO

If leaving Australia, have you notified Centrelink?  YES  NO (Please attach Centrelink confirmation)

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Child's First Name: \_\_\_\_\_ Child's Surname: \_\_\_\_\_

D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of absence from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Will child be leaving Australia at this time?  YES  NO

If leaving Australia, have you notified Centrelink?  YES  NO (Please attach Centrelink confirmation)

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Child's First Name: \_\_\_\_\_ Child's Surname: \_\_\_\_\_

D.O.B: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of absence from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Will child be leaving Australia at this time?  YES  NO

If leaving Australia, have you notified Centrelink?  YES  NO (Please attach Centrelink confirmation)

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Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Educator Name: \_\_\_\_\_ Educator Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please give your educator a minimum of two weeks' notice. Please forward this form to your educator, so it can be sent to the office for processing.**

**Please Note: Depending on the situation, certain requirements may need to be met for CCS or ACCS payments to be eligible to be paid to the educator during the absence period.**

### OFFICE USE

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ by: \_\_\_\_\_ Position: \_\_\_\_\_

Checked by Approved Provider: \_\_\_\_/\_\_\_\_/\_\_\_\_

Meets CCSS requirements for allowable absences eligibility:  YES  NO